

Red River Parish School System
REQUEST FOR FUND RAISING ACTIVITY
(To Be Submitted in Triplicate)

School _____ Date _____

TO: RED RIVER PARISH SCHOOL BOARD ACCOUNTING DEPARTMENT

Type of Activity _____

Date(s) to be Held _____

To Be Conducted by (Sponsoring Organization) _____

Estimated Faculty Time Involved (Hours) _____

Estimate of Profit to be Made \$ _____

Cost of Activity \$ _____

Profit to be used for _____

Signature of Teacher

Signature of Principal

Signature of Bookkeeper

APPROVED _____
Business Manager

White Copy—Superintendent

Yellow Copy—Accounting Department

Pink Copy—School